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Mail Stop ISSUE FEE

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OCT 19 2005

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29074 7590 09/23/2005

VISTEON  
C/O BRINKS HOFER GILSON & LIONE  
PO BOX 10395  
CHICAGO, IL 60610

10/19/2005 CNGUYEN1 00000061 061500 10620887

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 273-2885, on the date indicated below.

<i>Ashley L. Roodes</i> <i>Ashley L. Roodes</i>	(Depositor's name)
<i>October 19, 2005</i>	(Signature)
<i>October 19, 2005</i>	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/620,887	07/16/2003	James V. Jones	10541-18 i8	9101

TITLE OF INVENTION: INFRARED ABSORBING BLUE GLASS COMPOSITION

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	12/23/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
BOLDEN, ELIZABETH A	1755	501-070000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.	BRINKS HOFER GILSON & LIONE
<input checked="" type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.	1. <input type="checkbox"/>	2. <input type="checkbox"/>
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PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

## (A) NAME OF ASSIGNEE

## (B) RESIDENCE: (CITY and STATE OR COUNTRY)

VISTEON GLOBAL TECHNOLOGIES, INC.

VAN BUREN TOWNSHIP, MICHIGAN

Please check the appropriate assignee category or categories (will not be printed on the patent):  Individual  Corporation or other private group entity  Government

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 The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 06-1500 (enclose an extra copy of this form).

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a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature Eric J. SosenkoTyped or printed name Eric J. SosenkoDate October 19, 2005Registration No. 34,440

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